



COUNTY OF FAIRFAX  
Department of Planning and Zoning  
Zoning Evaluation Division  
12055 Government Center Parkway, Suite 801  
Fairfax, VA 22035 (703) 324-1290, TTY 711  
[www.fairfaxcounty.gov/dpz/zoning/applications](http://www.fairfaxcounty.gov/dpz/zoning/applications)

APPLICATION No: SP 2014-MV-069  
(Staff will assign)

RECEIVED  
Department of Planning & Zoning

MAR 06 2014

Zoning Evaluation Division

**APPLICATION FOR A SPECIAL PERMIT**

(PLEASE TYPE or PRINT IN BLACK INK)

APPLICANT	NAME <u>Fauzia Zubair</u> <u>E.Z DAY CARE</u> <u>M 5/8/14</u>		
	MAILING ADDRESS <u>8632 Gateshead Rd Alexandria VA 22309</u>		
	PHONE HOME (703) 619-0549 WORK (703) 474-8050		
	PHONE MOBILE (571) 229-8050		
PROPERTY INFORMATION	PROPERTY ADDRESS <u>8632 Gateshead Rd Alex VA 22309</u>		
	TAX MAP NO. <u>1013</u>	SIZE (ACRES/SQ FT) <u>20090002</u> <u>15,300</u>	
	ZONING DISTRICT <u>R.2C</u>		MAGISTERIAL DISTRICT <u>Mt. Vernon</u>
	PROPOSED ZONING IF CONCURRENT WITH REZONING APPLICATION:		
SPECIAL PERMIT REQUEST INFORMATION	ZONING ORDINANCE SECTION <u>8-305</u>		
	PROPOSED USE <u>Home child care Facility</u>		
AGENT/CONTACT INFORMATION	NAME <u>N/A</u>		
	MAILING ADDRESS		
	PHONE NUMBER	HOME	WORK
	PHONE NUMBER	MOBILE	
MAILING	Send all correspondence to (check one): <input checked="" type="checkbox"/> Applicant -or- <input type="checkbox"/> Agent/Contact		

The name(s) and addresses of owner(s) of record shall be provided on the affidavit form attached and made part of this application. The undersigned has the power to authorize and does hereby authorize Fairfax County staff representatives on official business to enter the subject property as necessary to process the application.

Fauzia Zubair  
TYPE/PRINT NAME OF APPLICANT/AGENT

Fauzia  
SIGNATURE OF APPLICANT/AGENT

DO NOT WRITE IN THIS SPACE

Date Application accepted: May 16, 2014 Application Fee Paid: \$ 435.00